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7  
8 **BEFORE THE**  
**BOARD OF REGISTERED NURSING**  
9 **DEPARTMENT OF CONSUMER AFFAIRS**  
**STATE OF CALIFORNIA**

10 In the Matter of the Accusation Against:

Case No. **2010 - 436**

11 **MARIA SANTOS MANINGDING**  
12 **2760 Carmel Drive**  
13 **San Bruno, CA 94066**

**A C C U S A T I O N**

14 **Registered Nurse License No. RN 616422**

15 Respondent.

16 Complainant alleges:

17 **PARTIES**

18 1. Louise R. Bailey, M.Ed., RN (Complainant), brings this Accusation solely in her  
19 official capacity as the Interim Executive Officer of the Board of Registered Nursing (Board),  
20 Department of Consumer Affairs.

21 2. On or about April 1, 2003, the Board issued Registered Nurse License Number RN  
22 616422 to Maria Santos Maningding (Respondent). The license was in full force and effect at all  
23 times relevant to the charges brought herein and will expire on March 31, 2011, unless renewed.

24 **JURISDICTION**

25 3. This Accusation is brought before the Board under the authority of the following  
26 laws. All section references are to the Business and Professions Code (Code) unless otherwise  
27 indicated.

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1           9. California Code of Regulations, title 16, section 1443, states:

2           “As used in Section 2761 of the code, ‘incompetence’ means the lack of possession of or  
3 the failure to exercise that degree of learning, skill, care and experience ordinarily possessed and  
4 exercised by a competent registered nurse as described in Section 1443.5.”

5           10. California Code of Regulations, title 16, section 1443.5 states:

6           “A registered nurse shall be considered to be competent when he/she consistently  
7 demonstrates the ability to transfer scientific knowledge from social, biological and physical  
8 sciences in applying the nursing process, as follows:

9           “(1) Formulates a nursing diagnosis through observation of the client’s physical condition  
10 and behavior, and through interpretation of information obtained from the client and others,  
11 including the health team.

12           “(2) Formulates a care plan, in collaboration with the client, which ensures that direct and  
13 indirect nursing care services provide for the client’s safety, comfort, hygiene, and protection, and  
14 for disease prevention and restorative measures.

15           “(3) Performs skills essential to the kind of nursing action to be taken, explains the health  
16 treatment to the client and family and teaches the client and family how to care for the client’s  
17 health needs.

18           “(4) Delegates tasks to subordinates based on the legal scopes of practice of the  
19 subordinates and on the preparation and capability needed in the tasks to be delegated, and  
20 effectively supervises nursing care being given by subordinates.

21           “(5) Evaluates the effectiveness of the care plan through observation of the client’s  
22 physical condition and behavior, signs and symptoms of illness, and reactions to treatment and  
23 through communication with the client and health team members, and modifies the plan as  
24 needed.

25           “(6) Acts as the client’s advocate, as circumstances require, by initiating action to improve  
26 health care or to change decisions or activities which are against the interests or wishes of the  
27 client, and by giving the client the opportunity to make informed decisions about health care  
28 before it is provided.”

1 11. California Code of Regulations, title 16, section 1444, provides, in pertinent part:  
2 "A conviction or act shall be considered to be substantially related to the qualifications,  
3 functions or duties of a registered nurse if to a substantial degree it evidences the present or  
4 potential unfitness of a registered nurse to practice in a manner consistent with the public health,  
5 safety, or welfare. Such convictions or acts shall include but not be limited to the following:

6 "(a) Assaultive or abusive conduct including, but not limited to, those violations listed in  
7 subdivision (d) of Penal Code Section 11160."

8 12. Penal Code section 11160, subdivision (d) (17), defines "assaultive or abusive  
9 conduct" to include "[c]hild abuse or endangerment, in violation of Section 273a or 273d."

#### 10 COST RECOVERY

11 13. Code section 125.3 provides, in pertinent part, that the Board may request the  
12 administrative law judge to direct a licensee found to have committed a violation or violations of  
13 the licensing act to pay a sum not to exceed the reasonable costs of the investigation and  
14 enforcement of the case.

#### 15 FIRST CAUSE FOR DISCIPLINE

16 (Gross Negligence and/or Incompetence: Improper Triage)

17 14. Respondent is subject to disciplinary action under Code section 2761, subdivision  
18 (a)(1), for gross negligence and/or incompetence in her triage of Patient AG upon his arrival in  
19 the emergency department, in that she failed to properly prioritize the severity of his condition, as  
20 follows:

21 15. On or about August 2, 2005, Respondent was working as a triage nurse in the  
22 Emergency Department at San Mateo General Hospital in San Mateo, California, when Patient  
23 AG<sup>1</sup> arrived by ambulance with multiple self inflicted lacerations to his right forearm. At  
24 approximately 11:25 AM, Respondent assessed AG and classified him as priority 2 (urgent)<sup>2</sup>,

25  
26 <sup>1</sup> Patient AG's initials are used to protect his privacy; his full name will be disclosed upon  
request during discovery.

27 <sup>2</sup> The Urgent Group is defined as including "[p]atients presenting with a non life-  
28 threatening condition, and need prompt intervention so that the condition does not become life-  
threatening should not wait more than 30 minutes to be seen by a physician."

1 rather than priority 1 (emergent)<sup>3</sup>. AG was not seen by a physician until 12:04 PM. Thereafter he  
2 suffered cardiac arrest. Resuscitation attempts were unsuccessful; time of death was 1:01 PM.

### 3 SECOND CAUSE FOR DISCIPLINE

4 (Gross Negligence and/or Incompetence: Failure to Assess/Reconcile Medication)

5 16. Respondent is subject to disciplinary action under Code section 2761, subdivision  
6 (a)(1), for gross negligence and/or incompetence in that she failed to complete or document an  
7 accurate primary assessment on Patient AG, reconcile his medication history, and/or advocate for  
8 a serum drug screen to rule out potential overdose. The circumstances are described in paragraph  
9 15, above.

### 10 THIRD CAUSE FOR DISCIPLINE

11 (Gross Negligence and/or Incompetence: Failure to Establish IV Access)

12 17. Respondent is subject to disciplinary action under Code section 2761, subdivision  
13 (a)(1), for gross negligence and/or incompetence in that she failed to either place a peripheral IV  
14 line or advocate for placement of a central IV line in Patient AG. The circumstances are  
15 described in paragraph 15, above.

### 16 FOURTH CAUSE FOR DISCIPLINE

17 (Gross Negligence and/or Incompetence: Failure to Assess for/Notify of Suicide Risk)

18 18. Respondent is subject to disciplinary action under Code section 2761, subdivision  
19 (a)(1), for gross negligence and/or incompetence in that she failed to perform a suicide risk  
20 screening of Patient AG or notify the physician and/or nursing supervisor of Patient AG's suicidal  
21 ideation. The circumstances are described in paragraph 15, above.

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26 <sup>3</sup> The Emergent Group is defined as including patients with "[t]hose physical or  
27 psychosocial conditions which have life-threatening potential, which demand rapid evaluation  
28 and therapeutic intervention, in which a delay in treatment may result in a loss of life or limb. Patients placed in an emergent category shall be evaluated by the Emergency Department Physician immediately."

FIFTH CAUSE FOR DISCIPLINE

(Gross Negligence and/or Incompetence: Failure to Treat for Suicide Attempt)

19. Respondent is subject to disciplinary action under Code section 2761, subdivision (a)(1), for gross negligence and/or incompetence in that she failed to closely monitor Patient AG's vital signs or place him on oxygen, pulse oximetry, or an EKG monitor. The circumstances are described in paragraph 15, above.

SIXTH CAUSE FOR DISCIPLINE

(Unprofessional Conduct: Conviction of a Substantially Related Crime)

20. Respondent is subject to disciplinary action pursuant to Code section 2761, subdivision (f), for conviction of crime substantially related to the qualifications, functions, and duties of a registered nurse, as follows:

21. On or about July 8, 2008, Respondent was convicted on her plea of nolo contendere of having violated Penal Code section 273a, subdivision (b) (child endangerment), as a result of having hit her 11-year-old son about the head on or about February 25, 2008. Imposition of sentence was suspended and Respondent was placed on court probation for four years and required to complete a one-year child abusers treatment program.

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PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Board of Registered Nursing issue a decision:

1. Revoking or suspending Registered Nurse License Number RN 616422, issued to Maria Santos Maningding;

2. Ordering Maria Santos Maningding to pay the Board of Registered Nursing the reasonable costs of the investigation and enforcement of this case, pursuant to Business and Professions Code section 125.3; and,

3. Taking such other and further action as deemed necessary and proper.

DATED: \_\_\_\_\_

3/16/10

*Louise R. Bailey*  
LOUISE R. BAILEY, M.ED., RN  
Interim Executive Officer  
Board of Registered Nursing  
Department of Consumer Affairs  
State of California  
*Complainant*

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